MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.		FILING DATE
APPLICANT(S)	10/521577	

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓							51						
2		✓						52						
3		✓						53						
4		✓						54						
5		✓						55						
6		✓						56						
7		✓						57						
8		✓						58						
9		✓						59						
10		✓						60						
11		✓						61						
12		✓						62						
13		✓						63						
14		✓						64						
15		✓						65						
16		✓						66						
17		✓						67						
18		✓						68						
19		✓						69						
20		✓						70						
21		✓						71						
22		✓						72						
23		✓						73						
24	✓							74						
25		✓						75						
26	✓							76						
27		✓						77						
28	✓							78						
29		✓						79						
30	✓							80						
31		✓						81						
32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	9	↓		↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.	22	←		←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS	31							TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)